



**HEAD & NECK CANCER**  
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# WHAT IS HEAD AND NECK CANCER?





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## WHAT IS HEAD AND NECK CANCER?

This information may help answer some of your questions and help you think of other questions that you may want to ask your cancer care team; it is not intended to replace advice or discussion between you and your cancer care team.

## WHAT IS CANCER

Our bodies are made up of millions of cells. Each cell has a specific job. Groups of cells with the same job make up tissues and organs, for example, skin or muscles.

Cells multiply to help our bodies grow and repair. When cells multiply in an abnormal way, they can form a lump (also known as a tumour), and damage the normal cells close by.

Not all lumps are cancer. Lumps or tumours that are not cancer are called **benign**. When a lump is a cancer, it is called **malignant**. That means the cancer cells take over the area of the body they are growing in.

Cancer can spread from one place to other parts of the body. Cancer spreads when cells travel through the lymphatic system to the lymph nodes or when cells break off the main lump and get carried in the blood to other parts of the body, where they can start growing. This is called metastasis.

## AN OVERVIEW TO HEAD AND NECK CANCER

Head and neck cancer includes a range of different cancers that are classified based on their location in the head or neck and the type of cancer cells.

Head and neck cancer often refers specifically to cancers that begin in the cells that line the moist mucosal surfaces including the mouth (oral cavity), nose and sinuses, throat (pharynx) and voice box (larynx).

- These cancers are usually squamous cell carcinomas (SCCs) and account for about 95% of cases.
- Mucosal head and neck cancers are diagnosed in approximately 3500 Australians every year; representing 2–3% of all cancers.
- Mucosal head and neck cancer is nearly twice as common in men and often diagnosed in people over the age of 50.

Thyroid cancers are more common than mucosal head and neck cancers and occur in 2400 Australians every year. They are more common in women and often occur at a younger age.

Skin cancers of the head and neck are so common in Australia that we don't even know how many occur. It is estimated that more than 500 000 Australians are treated every year for skin cancer. They are more common in men and become more common as you get older, mainly due to sun exposure.

Less commonly, head and neck cancers may occur in the salivary glands, and other tissues in the face, neck, eyes and ears.

## **CAUSES OF HEAD AND NECK CANCER**

The most important risk factors for mucosal head and neck cancer are tobacco (cigarette smoking, cigars, pipes, chewing tobacco or snuff), alcohol use and exposure to the human papillomavirus (HPV)

Those with a long history of tobacco use, heavy tobacco use and who use both tobacco and alcohol are at a significantly higher risk of head and neck cancer.

Infection with HPV is also a risk factor for some types of head and neck cancer, particularly those involving the tonsils or tongue base (known as oropharyngeal cancer). The HPV related cancers, particularly those of the tonsils and tongue base, are now one of the most common types of head and neck cancer in Australia. These cancers are not related to smoking or alcohol and often have a better response to treatment. HPV is very common in the general population, and most people who acquire HPV never develop cancer.

Other risk factors for head and neck cancer include increasing age, male gender, race, inhalation of certain chemicals and dusts, the Epstein-Barr Virus (EBV), chewing betel nut and possibly a diet low in fruit and vegetables.

Sun exposure is the most important risk factor for skin cancers, particularly repeated sunburn as a young adult.

Previous radiation exposure is also an important risk factor for head and neck cancer, in particular thyroid cancers. There is usually a delay of at least 10 years from the time of exposure to development of the cancer.

Some patients may not have any identifiable cause for their cancer.

You know your own body better than anybody else. If you think that something isn't right or you notice any signs of Head and Neck Cancer, speak with your regular doctor.

## **SIGNS AND SYMPTOMS**

The following signs and symptoms are common for many types of Head and Neck Cancer. Sometimes people do not have any signs or symptoms and sometimes the same symptoms can be caused by other things. These symptoms may also be caused by many other less serious conditions.

**You should see a doctor if you have any of these symptoms for more than three weeks:**

- A neck lump
- A lump or sore that does not heal
- A red or white patch in the mouth
- Swelling, bleeding, pain or numbness in the face or within the mouth
- Trouble speaking
- Hoarse voice
- Difficulty chewing or swallowing
- A sore throat that doesn't get better after a week or two
- Trouble breathing
- Blood in your saliva or phlegm
- Ear pain that doesn't go away
- A blocked ear that doesn't clear
- Jaw pain that doesn't go away
- Problems with dentures
- Loose teeth
- A blocked nose
- Frequent nose bleeds
- A bulging or watery eye
- Problems seeing, for example double vision
- Unexplained weight loss

**Head and Neck Cancer can cause different symptoms depending on:**

- where it is
- what type it is
- what stage it is at

**If you have signs of Head and Neck Cancer, your doctor will need to explore these signs more. Your doctor may:**

- speak with you about the problem as well as other illnesses, medications, and whether you smoke or drink alcohol (medical history)
- feel and look in your neck, mouth and throat for anything unusual (physical examination)
- request that you have some tests (diagnostic tests)
- refer you to a specialist for more tests.

There are many tests that can be used to diagnose head and neck cancer. Not everyone will need to have every test.

## **UNDERSTANDING YOUR DIAGNOSIS**

A diagnosis of cancer can be overwhelming and confusing. When you are first diagnosed, you may be in shock. You might not be able to concentrate on the news your doctor is giving you. This is normal.

You may have a lot of questions. You may not know what questions to ask, but it is important that you understand what a diagnosis of cancer means for you.

Talk with your healthcare team about your diagnosis and the different treatment options that may be helpful for you. Please tell your doctors if you are confused or do not understand something they tell you.

You can ask questions during your appointments. Your healthcare team will give you information about cancer and support services that you may find helpful.

You can also find reliable information about the type of cancer you have and links to other useful sources of information at [www.headandneckcancer.org.au](http://www.headandneckcancer.org.au).

## HEAD AND NECK CANCER TESTS

It is important that your doctor establishes the diagnosis of your type of Head and Neck Cancer, assesses the size of the cancer and whether it has spread to the lymph nodes in the neck or elsewhere in the body.

To answer these questions, your doctor will need to do the following things:

- Talk with you about your medical history. This includes signs you may have noticed, any other health conditions, medications that you are taking, and whether you smoke or drink alcohol.
- Perform a physical examination by feeling and looking inside your throat and neck.
- Order diagnostic tests, which may include scans or a biopsy.

A biopsy involves removal of a tissue sample that is then examined in detail by a specialist pathologist, under a microscope to look for cancer cells. Biopsies can often be performed in the office with local anaesthetic, but occasionally require sedation or general anaesthesia (you will be asleep and will not remember what happens during the procedure) in the operating room.

Not everyone will need to have every test. Your doctor will recommend tests that are right for you.

## STAGING AND GRADING

### STAGING

Once your doctor has diagnosed cancer, it is important to find out how big the cancer is and where it started to grow. They need to see if the cancer has spread to the lymph nodes in the neck (nodal metastases) or other parts of the body such as the lungs, liver or bone (distant metastases). The term used to describe where the cancer has started to grow is called 'primary' and if it spreads to other parts of the body such as the lungs, liver or bones, it is called a 'secondary' or 'metastases'. This is called **staging**. Staging a cancer is important because it helps your doctor to choose the best treatment for you.

An international staging system called the TNM system is used. The T refers to the original or 'primary' tumour, the N to the lymph nodes in the head and neck, and the M to metastases elsewhere in the body.

The doctor will obtain this information based on an examination (which may include an endoscopy through the nose) and imaging (which may include ultrasound, computed tomography [CT], magnetic resonance imaging [MRI] or positron emission tomography [PET] scans). In some cases, an examination under general anaesthesia in the operating room may be required.

It is important to know that the staging systems for head and neck cancer are not very good at predicting the chances of cure for one person. For example, Stage III (3) or IV (4) cancers may include many groups of people where the chances of cure are very good but also others where the cancer may not be curable. It is important you discuss the stage of your cancer with your doctors to understand what it means for you.

## GRADING

Your doctor will also be interested in the grade of the cancer. Grading refers to how quickly a cancer is likely to grow and spread. The grade of the cancer is determined by a pathologist who examines a biopsy sample under a microscope. The pathologist determines the grade of the cancer by how the cells look. The grade can be used to estimate how quickly the cancer is likely to grow and spread.

It is important to know that grading is not always correct and is just one part of the pathology report that your doctor will look at when recommending what treatment is best for you. Ask your doctor if you have any questions about this.

## TREATMENT

When found early, head and neck cancers are typically curable. The treatment approach depends on the type, location and stage of the cancer as well as age and overall health.

Common treatment options include:

- **Surgery:** Involving removal of the cancer, some of the surrounding healthy tissue and, in some cases, lymph nodes in the neck that are known to be involved or at risk. Reconstructive surgery may also be necessary for functional and/or cosmetic reasons.
- **Radiation therapy:** Involving the use of high-energy X-rays to destroy cancer cells.
- **Chemotherapy:** Involving the use of drugs to destroy cancer cells.
- **Immunotherapy:** It is a treatment that helps the body's own immune system recognize and attack cancer cells, and is commonly used for some advanced or recurrent head and neck cancers.

Often a combination of these treatment options is recommended. The doctor may also suggest taking part in a clinical trial.

## **THE CANCER CARE TEAM**

After a diagnosis of cancer has been made, your doctor is likely to talk about your diagnosis with the cancer care team they work with. This is known as a Head and Neck Cancer Multidisciplinary Team (MDT).

You may be asked to attend an appointment where the MDT talks about how best to treat your cancer and coordinate your treatment and care. This team includes experts who will review the diagnosis and tests performed, and considers all parts of your treatment and recovery.

The team may include a head and neck surgeon, reconstructive surgeon, radiation oncologist, medical oncologist, cancer nurses, speech therapists, dietitians, dentists and social workers.

The purpose of the MDT is to decide on the best treatment for your cancer and to help you regain the best function possible in the long-term. When planning treatment, the cancer care team may discuss the options available and help weigh up the advantages and disadvantages of each approach and/or consider the possible side effects which may affect appearance, wellbeing, speech, eating and breathing.

## **SEEKING A SECOND OPINION**

The complex nature of cancer means that there is not always only one way to for it to be treated. A second opinion may help you to feel more confident about your diagnosis and treatment options.

A second opinion may help to:

- confirm your diagnosis
- give you extra details about your cancer
- give you a different perspective from another cancer expert
- give you alternative treatment options that you had not yet considered

Some people worry that the doctor will be offended if they ask for a second opinion, however specialists often welcome a second opinion. This can be an important part of the decision-making process for you and

reassure you that you have explored all your options and allow you to feel more confident about the decisions you make.

## UNDERSTANDING YOUR PROGNOSIS

When you are diagnosed with cancer, you may have questions about how serious the cancer is. Doctors use the term “prognosis” to describe the chance of cure, and if it is not curable how quickly the tumour may grow and how long you may live.

It is important to discuss head and neck cancer prognosis with the doctor. Although the type, location and stage of cancer may allow an estimate of the prognosis, there are many other factors that influence this and every individual is different. Because of this no doctor can give you a completely accurate prediction about the course of your illness.

Typically, if a head and neck cancer is going to recur it does so within the first few years after treatment, but this is not always the case. The [cancer care team](#) usually continues close follow-up for at least 5 years, at which time many cancers are considered to be cured.

## QUESTIONS TO ASK YOUR DOCTOR

Being diagnosed with cancer can be overwhelming and confusing. There are a lot of information and treatment decisions to make at a distressing time for both the individual and their family. To help you understand everything and get the information you need to make decisions about your health, consider asking the following questions to your cancer care team:

- Exactly what type of cancer do I have? Where is it located?
- Why did I get this cancer? Is it related to smoking or the HPV virus?
- What stage is the cancer?
- What are my treatment options? Which treatment do you recommend for me and why?
- Have you discussed my case at a multidisciplinary team (MDT) meeting and if so, what were the recommendations?



- Who will be part of my cancer care team, and what does each person do? Do I need to see other specialists before treatment (such as a radiation oncologist, medical oncologist, reconstructive surgeon, dentist, dietician or speech pathologist)?
- What are the possible side effects of treatment in the short- and long-term? How can they be prevented or managed?
- What will happen if I don't have any treatment?
- How much will the treatment and/or operation cost? Will Medicare or my health insurance cover it?
- What follow-up tests will I need? How often will they be?
- Am I suitable for any clinical trials?
- Who can I call if I have any problems or questions?
- Where can I find emotional support for me and my family?
- Are there any patient support groups that you would recommend?
- If I wanted to get a second opinion, can you provide all my medical details? Do you mind if I get a second opinion?

You may want to write additional questions here to ask your doctor or cancer care team

### **About Head and Neck Cancer Australia**

Head and Neck Cancer Australia is Australia's only national charity dedicated to providing information and support to people living with head and neck cancer, caregivers, family and healthcare professionals.

Head and Neck Cancer Australia's mission is to improve the quality of life of everyone affected by head and neck cancer through education and access to support and to raise awareness of head and neck cancer nationally.

Head and Neck Cancer Australia supports people through their cancer journey, from diagnosis to treatment and life after cancer by providing comprehensive, easy to understand and easy to access information. We have the only Directory of Head and Neck Cancer services and support groups available in Australia and New Zealand helping people to find the right services and support when they need it most.

Phone: 1300 424 848

Email: [contact@headandneckcancer.org.au](mailto:contact@headandneckcancer.org.au)

Web: [www.headandneckcancer.org.au](http://www.headandneckcancer.org.au)

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**First Published:** 2016

**Last updated:** February 2026